

ATTORNEY'S DOCKET NUMBER
AST-4-PCT

DECLARATION AND POWER OF ATTORNEY

As a below named inventor I hereby declare that:

My residence, post office address and citizenship are as stated below.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **MACROCYCLIC ANTIBIOTICS AS SEPARATION AGENTS**

the specification of which (check only one item below):

☐ is attached hereto.

☐ was filed as United States application Serial No. _____ on _____

☒ was filed as PCT International application No. PCT/US95/02071 on February 17, 1995

and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT International application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
U.S.	08/198,409	22 Feb. 1994	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
PCT	PCT/US95/02071	17 Feb. 1995	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT International application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

PCT / US APPLICATION NUMBER	PCT / US FILING DATE	PATENTED(✓)	PENDING(✓)	ABANDONED(✓)
U.S.S.N. 08/198,409	February 22, 1994		X	
PCT/US95/02071	February 17, 1995		X	

And I hereby appoint William D. Lucas, Reg. No. 17,721; David L. Just, Reg. No. 25,687, and Donald C. Lucas, Reg. No. 31,275, of the firm of Lucas & Just of 205 East 42nd Street, New York, N.Y. 10017, Telephone No. (212) 682-4980, Facsimile No. (212) 573-6127, my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith and to receive all correspondence in connection with this application.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor:

Insert Name of Inventor
Insert Date This Document is Signed

Insert Residence
Insert Citizenship

Insert Post Office Address

Full Name of Second Inventor, if any:
see above

Full Name of Third Inventor, if any:
see above

Full Name of Fourth Inventor, if any:
see above

GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	DATE
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GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	DATE
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POST OFFICE ADDRESS (Complete Street Address including City, State & Country)			
GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	DATE
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POST OFFICE ADDRESS (Complete Street Address including City, State & Country)			